places. The house is sealed and the disinfecting gas applied. After the proper time the cultures are examined by the hacteriologist, and if there is any trace of life the disinfection is not considered perfect.

Unless fumigation is done perfectly it is worse than useless, for it

gives a false sense of security.

The nurse called to care for those suffering from this disease should She should be in perfect be an immune or protected by vaccination. health and able to carry out the technique usually employed for contagious cases.

Sheets, towels, and personal linen should be first disinfected with carbolic and then boiled one hour. Sweeping should be done with a broom covered with a cloth wet in disinfectant solution. The cloth and sweepings should be burned at once; handkerchiefs, dressings, and uneaten food may also be burned.

Secure good ventilation, but protect the patient from draughts. Strong sunlight should be excluded, and the patient's eyes further protected by dark glasses and screens about the bed.

If the patient is delirious, cover the hands with mittens to keep him from scratching.

The odor is best combated with carbolic or some of the preparations

of phenol.

Nothing must be removed from the room until disinfected or fumi-

gated. Sheets wet in carbolic may be hung at the doors.

"The cost of an epidemic of smallpox is incalculable. Much must be expended for ambulance and hospital service, house disinfection, and quarantine of exposed persons and public conveyances."

The loss to private and national wealth can hardly be computed. The State fixes the cost of one life at five thousand dollars. The greatest loss is that life itself and the great number of those who are made infirm, blind, and crippled.

THIRTY YEARS OF PROGRESS*

BY LINDA RICHARDS

WE this evening celebrate the thirtieth anniversary of this Training-School, of the Massachusetts General Hospital, and you have conferred upon me the honor of saying a few words to you upon this happy occasion. I have been asked to say something of what training-schools have accomplished in large general hospitals, of the work done in the small hospitals,

* An address given at the thirtieth anniversary of the organization of the Training-School of the Massachusetts General Hospital.

and of what is being done in some special hospitals. But first let me thank you for the honor you have given me. I sincerely appreciate it, and for it you have my heartfelt thanks.

I wish to congratulate you upon the great and widespread good this school has accomplished in its thirty years as well as upon your standing, second to no other school in this broad land. Much you have to be proud of. What school can boast of more able women than this? What school has given to other hospitals more efficient workers than this? From the Atlantic to the Pacific coast they may be found in charge of hospitals or schools, and also from the North to the South, and far away in the Orient, and wherever they are found they are proving a credit to their school and to our profession.

This is a favored school, well spoken of and respected by sister schools, and in its prosperity it can afford to look backward to its small, insignificant birth and early childhood. It had not an altogether happy lot in its early years. It was a foster child, not wished for, and given the worst wards of the house to care for, and the sins of omission and commission of the entire nursing force of the hospital it was often made to bear.

But adversity often is the means of developing sterling qualities, and who can say that the strength of character of some of the first graduates was not in part the result of and developed by their surroundings here? These women felt deeply the responsibility resting upon them. bore well her part, and it was due to their most excellent work, as also to their dignity and womanliness as nurses, that the people who at first were our sworn enemies came to be our very warmest friends. We find women by their daily lives raise the standard of communities in which they are placed, so refined, educated, earnest women placed the nursing service and hospital upon a much higher plane than it had ever before attained. The very people who had said "the nursing of the Massachusetts General Hospital could not be improved upon" were from their own observation forced to confess themselves mistaken. A man well known to many of us once said of a nurse, "Miss Blank has taught me what a lady can do for the nursing profession," and training-schools and trained nurses have shown to the public what cultivated women with high ideals can do for our profession.

Just for a moment let us compare the work of to-day, which we all know so well, to that of the time when there were no training-schools. The old-time nurses had very few ideas higher than that of having presentable wards. That was well as far as it went, but it stopped there. If time allowed after the ward was in order, and if the nurse felt the inclination, which she seldom did unless she was a superior woman of her

class, she might do some little offices for the patients. But that she had no real knowledge of their condition is proved by an instance which came under my own observation which I would like to relate.

In one of the large hospitals where I was organizing a trainingschool in those early days, before I had really taken hold of the work but was finding my bearings before making changes, I was making rounds one morning when, upon entering a ward, I saw at a glance that a man in a bed near the door was dying. The nurse stood near, in full view of the man's face, quietly doing her morning's dusting, and doing it well. I stepped to the bedside, examined the patient's pulse, wiped the dampness from his face, and then, going back to the nurse, who was still dusting, I inquired, "How long has this man been in this condition?" She looked up with a very blank expression on her face and asked, "What condition?" I said, "Do you not know that this man is dying?" She answered, with surprise, "Why, no!" I instructed her to send for the doctor at once, place the screens around the bed, and to stay with him as long as he lived, and passed on. Later in the day, when I made rounds again, as I entered the ward the nurse came to me and said, "Miss Richards, would you mind telling me how you knew that man was dying?" I asked her how long she had been in that ward, and she answered, "Two years." Then I said to her, "You have been in this ward where men are constantly coming in and where not a few die all the time," and she said again, "Yes." "Then will you tell me how you could have been in this ward all of that two years and not be able to know when a man is dying? I will tell you how I know when a man is dying: I have learned by caring for my patients, by carefully watching them and observing the changes from day to day and from hour to hour, and by being interested in each and every one of them as human beings dependent upon my care.

This will give some idea of the quality of the nursing before trainingschools were organized. Do we wonder that a doctor once said to me, "I do not see how hospitals could be run without training-schools"? And thus by training-schools a very great and glorious change has come

to the large general hospitals.

What of the small hospitals, which of late years have multiplied so rapidly throughout our land? Could they exist and bear the enviable name they do but for trained nurses? Hardly, for each of these small hospitals has at its head a graduate nurse. If the hospital is very small, the nursing force will be found to consist of graduate nurses only, and we can easily see why the nursing is of so high a character. These small hospitals pride themselves upon the excellent care they give their patients. In some of the larger of the small hospitals will be found good trainingschools,—schools which compare favorably with those of the large hospitals,—and in them will be found women as refined and well educated as those in the larger schools, the work in these hospitals being as varied and the hospitals as well equipped with up-to-date appliances, the methods used being the same as in our largest and best city hospitals. These small hospitals are a necessity and a very great blessing to the country, and they have given to the nursing profession some very able nurses. They do a most needed work, and this our profession has done great things for.

We now come to another class of hospitals, the problem of which has not been fully settled as yet. We have in our midst many large State hospitals for the insane, in which nursing has been of the same class as that in the general hospitals before the organization of trainingschools. Better nursing is and has for a long time been a necessity. The only way to secure it seems to be by the organization of trainingschools. The question has been, Can nurses receive any kind of training in these hospitals? When I took up the work in insane hospitals I said, Only special training. I have been for nearly five years in this branch of work. I am changing my mind. I find where a training-school is to be found a woman who is a graduate of a training-school of some general hospital is at its head. This same woman brings with her ideas which she puts into practice. She finds, and so do the doctors, plenty of sick people—physically sick, I mean—who need to be cared for and whose care must be the same as that given to sane people under the same conditions of illness. The patient is for the time forgotten and the nurse cares for a sick man or woman. These hospitals, being large, like small communities, say of from six hundred to twenty-four hundred people, will have among them many really sick. They have the same diseases as the sane. We will find in nearly every State hospital an up-to-date surgical department which is often in use, rooms for the treatment of gynæcological cases, of which there are many, occasional obstetrical cases are found, and all these are cared for as they are in other hospitals. The care of the insane calls for a special training, of course, and here the nurses become experts in hydrotherapy. That these schools turn out good nurses may be proved in one instance which I will mention. I have to-day as supervisor of five of our very worst wards a graduate of the Danvers Training-School. All kinds of emergencies are constantly arising, and I have yet to meet one to which she has not proved herself equal. In these hospitals training-schools are new. They have their work to do. But they will raise the standard of the nursing and of the hospitals, as they have done in the general hospitals; and, as in general hospitals, each year will see the schools better than the preceding year.

Material for experience is not wanting; opportunity for practice is abundant.

Schools are a necessity. Training-schools in the past thirty years have, as we have seen, done much for hospitals. But they have done more than this. What a blessing have trained nurses been in the homes of the rich and in the hovels of the poor! Who can estimate the good done in almshouses, tenement houses, schools, college settlements, in missions, and in the army? Let us not forget the hundreds of children who have better mothers because those mothers were first nurses, then wives and mothers.

Wherever we turn we see the fruits of the labor of the trained nurse. This school has in its thirty years given nurses to all branches mentioned. It has been very abundant in good works. May its future far exceed its past! May each year's work be crowned with additional glory?

THE SHORTCOMINGS OF THE TEACHINGS AND METHODS OF THE PRESENT TRAINING-SCHOOLS FROM THE STANDPOINT OF THE GRADUATE NURSE ENGAGED IN INSTITUTIONAL WORK*

BY ANNE S. BUSSELL Presbyterian Hospital, New York

In all professions and scientific pursuits there is to-day a decided movement towards specialized work, also towards a more general culture of the individual.

The need of such movement in our profession has been felt by many nurses, more particularly, perhaps, by those engaged in institutional work.

These nurses, the actual teachers of nursing, have not only desired, but have striven for, a high standard in the profession and higher education in the women who enter it.

With the present great demands on their time, strength, and mind they realize the impossibility of attaining by study or any other method the varied knowledge now necessary to come up to the teaching they themselves have striven to provide for their pupil nurses.

It is becoming manifestly impossible that one woman can be or do all that is increasingly demanded of the nurse by the world at large and by those of her own profession.